CANDIDATE / OFFICEHOLDER :AMPAIGN FINANCE REPORT

4734

FORM C/OH COVER SHEET PG 1

(512) 463-5800

The C/OH INSTRUCTION this form.	N GUIDE explains how to complete	1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER	TITLE FIRST	MI	OFFICE USE ONLY	
NAME !	Constable Kevin NICKNAME LAST Miskell	SUFFIX	Dale Received	
4 CANDIDATE / OFFICEHOLDER ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CIT P.O. Box #90056 Austi	·	2 25 PH	
5 CAMPAIGN TREASURER NAME	TITLE FIRST WILL NICKNAME LAST Hampton	MI	Receipt # 4. Fig. 1. Amount Date Processed	
6 CAMPAIGN TREASURER DDRESS esidence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE	E#: CITY; STATE;	Date Imaged ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION		
8 REPORT TYPE	January 15 30th day before election July 15 8th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Atlach C/OH - FR)	
9 PERIOD COVERED	Month Day Year OT / OL / IGC(8	GH 12 /31	/ 1998	
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Primary		General Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. Name			
additional pages	Address / PO Box; Apt / Suite #, City; Stale, Zip	o Code		
	COTOR	4050		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	KEYINI N	VISKELL CAMPAIGN	15 ACCOUNT # (Ethics Commission filers)	
16 SUPPORTING POLITICAL COMMITTEE(S)	•• This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 NO REPORTABLE ACTIVITY	Check here if	no reportable activity occurred during this reporting period. (Sign affidavit bel	ow and submit pages 1 and 2 only)	
18 CONTRIBUTION DATES	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$	
	4. TOTAL POLITICAL EXPENDITURES		\$	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THAY OF THE REPORTING PERIOD	\$	
19 AFFIDAVIT				
			perjury, that the accompanying report information required to be reported by	
		k_ Wi		
Notary	RILYN PITCOCK Public, State of Texas Commission Expires AN, 31, 2001	Signature of Candi	date or Officeholder	
Sworn to and subscribed	before me, by the sa	, , , , , , , , , , , , , , , , , , ,	Lat day of Oct	
19 (19), to certify wh	nich, witness my har	and and seal of office.		
Signature of officer ad	ym Mu	Print name of officer administering oath Tit	WOTARY PUBLIC le of officer administering oath	